

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO.

10-586,1664

FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1 st AMENDMENT		AFTER 2 nd AMENDMENT			AS FILED		AFTER 1 st AMENDMENT		AFTER 2 nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1		1				51						
2		1		1			52				1		
3		2		1			53				1		
4		2		1			54				1		
5		2		1			55				1		
6		2		1			56				1		
7		2		1			57				1		
8		2		1			58				1		
9		2		1			59				1		
10		2		1			60				1		
11		2		1			61				1		
12		2		1			62				1		
13		2		1			63				1		
14		2		1			64				1		
15		2		1			65				1		
16		2		1			66				1		
17		2		1			67				1		
18		2		1			68				1		
19		2		1			69				1		
20		2		1			70				1		
21		2		1			71				1		
22		2		1			72				1		
23		2		1			73				1		
24		2		1			74				1		
25		2		1			75				1		
26		2		1			76				1		
27		2		1			77				1		
28		2		1			78				1		
29		2		1			79				1		
30		2		1			80				1		
31		2		1			81				1		
32		2		1			82				1		
33		2		1			83				1		
34		2		1			84				1		
35		2		1			85				1		
36		2		1			86				1		
37		2		1			87				1		
38		2		1			88				1		
39		2		1			89				1		
40		2		1			90				1		
41		2		1			91				1		
42		2		1			92				1		
43		2		1			93				1		
44		2		1			94				1		
45		2		1			95				1		
46		2		1			96				1		
47		2		1			97				1		
48		2		1			98				1		
49		2		1			99				1		
50		2		1			100				1		
TOTAL IND.		↓	1	↓		↓	TOTAL IND.		↓		↓		↓
TOTAL DEP.		↑	22	↑		↑	TOTAL DEP.		↑		↑		↑
TOTAL CLAIMS			23				TOTAL CLAIMS						